

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

XUUD

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements.

The time limit for correction of each violation is specified in the narrative portion of this report.

Establishme	ent Name		Telephone Number	Telephone Number Date of Inspection PERMIT #		
History	H:llc N	liddle Schul	812 542 8581	(mm/dd/yr)		
Establishm	ent Address (1	number and street, city, state, zip code)		10/21/2019 19-134		
3491	Edmukvill	. Goden Rd.		·		
Owner			Purpose:	Follow-u	٠	se Date
NAFLS			. Routine	No 10 days		
Owner's Ac		\$	2. Follow-up	Summary of Violations:		
2801 Gr	at line Rd	Non Many, 12 47150	3. Complaint			
Person in C	harge	•	4. Pre-Operational	$C \bigcirc NC \bigcirc R \bigcirc R$		
Rose Ty	e Person's E-1		5. Temporary	Menu Type (See back of page)		
Keshouston	e reison s e-i		6. HACCP	Mond Type (see outs of page)		
Certified F	ood Manager		7. Other (list)	1 2 3 × 4 5		
	7	10/21		1*		
CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"						
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"						
Section#	C/NC I					orrected By
217	NL	Observed cracked/brittle plastic Code			Disco	rd / Righic
218	NC	Observed malk-in Freezer missing si	cal funglish to marky	close	2 \	meks
410	ے یہ	Observed light shield by works-ins to be lose Today				1
416	NC	Observed dead bugs in Bort light shields Z weeks				reles
426						senes kr
			To the state of		,	
421		- repair, replace, or remove	11/21 1 15	./1	7.1	Sunske
431	N.C	Obuned Both willing to be dies	H/SMING MA MUONY	CHACS	64E	JUNE 7 R /
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72 11 11	<u> </u>	Later D.	Tr. 4 11 7 100			
Received by (name and title printed): Inspected by (name and title printed):						
Rose tyler A.J. Ingray (EHS)						
Received by (signature): Inspected by (signature):						
19634 tyler						
ee:		cc;		ec:		
1				1		